



Office of the Registrar | 207 East 5th Street | Mail Stop 518 | Greenville, NC 27858-4353
 Office: (252) 328-6747 | Fax: (252) 328-4232 | Email: regis@ecu.edu
www.ecu.edu/registrar

Previously Enrolled Students Name/Address Change Form

CHANGE OF NAME CHANGE OF ADDRESS DATE: _____
Month / Day / Year

**Name change requests must include an official document with the new name displayed
 (e.g. Driver's License, SSN card, Military ID).**

ECU ID NUMBER: B _____ TELEPHONE NUMBER _____

PREVIOUS NAME: Mr. Mrs. Miss Ms.

First	Middle	Other	Last
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CURRENT NAME: Mr. Mrs. Miss Ms.

First	Middle	Other	Last
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NEW ADDRESS:

PO Box/RFD/Street Name and Number	City	State	Zip
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PERSONAL EMAIL ADDRESS

I CERTIFY THAT THE ABOVE IS MY LEGAL NAME ACCORDING TO APPLICABLE LAW.

Student Signature: _____ Date _____

PLEASE USE BALL POINT PEN